NOTICE OF FEE DUE

DATE: 02-08-02		· · · · · · · · · · · · · · · · · · ·
TO: 09/7/2,144		
FROM: Office of Initial Patent Exa	mination	
SUBJECT: Fee Due		ζ.
APPLICATION NUMBER: 09, 7	112,144	
A fee is due for the attached document of the following reason. Please authorization to charge a deposit accour charge the appropriate fee. If an author the fee deficiency.	check the applicatint. If an authorizati	on for the appropriate on is present, please
☐ Insufficient fee by check		
Insufficient funds in deposit account	t	
☐ Declined credit card		
☐ Non authorization for charge to depo	osit account	
☐ No fee submitted per requirement P		
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The correct fee code: 107	amount	\$_89
The suspended fee code: 197	amount	- \$
Fee Due	amount	=\$
f you have any questions, please contact Eleanor Kurtz at 703-308-3642.	t Cynthia Streater a	t 703-306-5430 or
Terminal Operator	a-W	

Application or Docket Number

PATENT APPLICATION FEE DETERMINATION RECORD

Effective January 1, 2003

CLAIMS AS FILED - PART I (Column 1) (Column 2)							SMALL	OTHER THAN OR SMALL ENTITY			
TC	TAL CLAIMS		(Column	1)	(Colui	1111 2)	TYPE		OR •		
L	TAL CLAINS						RATE	FEE		RATE	FEE
FC	R		NUMBER I	FILED	NUMBI	ER EXTRA	BASIC FE	E 375.00	OR	BASIC FEE	750.00
TOTAL CHARGEABLE CLAIMS			36 minus 20 *		* .	X\$			OR	X\$18=	
<u> </u>	EPENDENT CL		minus 3 = *				X42=		OR	X84=	,
MULTIPLE DEPENDENT CLAIM PF			RESENT				+140=		OR	+280=	
* If the difference in column 1 is			less than ze	ro, enter	olumn 2	TOTAL		OR	TOTAL	780	
CLAIMS AS AMENDED - PART II								•		OTHER	THAN
(Column 1) (Column 2) (Column 3)							SMALL	ENTITY	OR	SMALL	ENTITY
ENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER DUSLY	PRESENT EXTRA	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
AMENDMENT	Total	. 38	Minus	** 3	38_	=	X\$ 9=		OR	X\$18=	
AME	Independent	* 6 NTATION OF MI	Minus	***	S CLAIM	=	X42=		OR	X84=	84
L_	FIRST PRESE	NTATION OF IM	DETIPLE DEF	ENDEN	CLAIN		+140=		OR	+280=	
		•					TOTA		OR	TOTAL ADDIT. FEE	84
ADDIT. FEE											
ENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	IEST BER OUSLY	PRESENT EXTRA	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
MQN	Total	*	Minus	**		=	X\$ 9=		OR	X\$18=	
AMENDMENT	Independent	*	Minus	***	·	=	X42=		OR	X84=	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM									.000	
							+140=		OR	+280=	
						1	TOTA ADDIT. FEI		OR	TOTAL ADDIT. FEE	
		(Column 1)		(Colur		(Column 3)					
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER OUSLY	PRESENT EXTRA	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
NDM	Total	*	Minus	**		=	X\$ 9=		OR	X\$18=	
4ME	Independent	*	Minus	***	.	=	X42=		OR	X84=	
	FIRST PRESE	NTATION OF MI	JUIPLE DEF	'ENDEN	CLAIM		+140=	1	OR	+280=	
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.											

PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2000

Application or Docket Number

09712144

CLAIMS AS FILED - PART (Column 1)					•			SMALL ENTITY TYPE			OR SMALL ENTITY		
TOTAL CLAIMS						ſ	RATE	FEE		RATE	FEE		
FOR		NUMBER F	FILED	NUMBI	ER EXTRA		BASIC FEE	355.00	OR	BASIC FEE	710.00		
TOTAL CHARGEABLE CLAIMS			38 minus 20=		.18			X\$ 9=		OR	X\$18=	504	
INDEPENDENT CLAIMS			4 mir	nus 3 =				X40=		OR	X80=	80	
MULTIPLE DEPENDENT CLAIM PRESENT								+135=		OR	+270=		
* If the difference in column 1 is less			less than ze	ro, ente	r "0" in c	olumn 2	L	TOTAL		OR	TOTAL	1294	
	CI	LAIMS AS A	AMENDED - PART II								OTHER THAN		
		(Column 1)		(Colu		(Column 3)	1 -	SMALL		OR	SMALL		
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVI PAID	1BER	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
MQN	Total	. 26	Minus	2	\$	=	-	X\$ 9=		OR	X\$18=		
AME	Independent	* 5	Minus	***	C/	= 1		X40=		OR	\$ 6	84	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM BEST AVAILABLE COPY							' [+135=		OR	+270=	(
DEDI AVAILABLE VOI								TOTAL		OR	TOTAL ADDIT. FEE		
	ADDIT. FEEOTT ADDI												
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGI NUN PREVI	HEST MBER IOUSLY) FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
MO	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	·	
AME	Independent	*	Minus	***	T OL A 114	=	4	X40=		OR	X80=		
L	FIRST PRESE	NTATION OF M	ULTIPLE DEI	PENDEN	CLAIM		J	+135=		OR	+270=		
	P	EST Av		i ()	OPY		ì	TOTAL ADDIT. FEE		OR	TOTAL ADDIT, FEE		
		(Column 1)			ım <u>n 2)</u>	(Column 3)		ADDIT, FEET			ADDIT: 1 EC		
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIG NUN PREV	HEST MBER IOUSLY D FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	**		= '	וו	X\$ 9=		OR	X\$18=		
AME	Independent	*	Minus	***	IT OLAIN]=	1	X40=		OR	X80=		
Ĺ	FIRST PRESE	ENTATION OF M	IULTIPLE DE	PENDEN	II CLAIN		┚┃	+135=		OR	+270=		
•	If the entry in colu	ımn 1 is less than	the entry in col	umn 2, wri	ite "0" in co	olumn 3.	. "	TOTAL		OR	TOTAL		
** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.													